

APPLICATION
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TITLE: EMBOLIC COMPOSITIONS
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EMBOLIC COMPOSITIONS

CROSS-REFERENCE TO RELATED APPLICATIONS

This application is a continuation-in-part application of and claims priority to U.S. Application Serial No. 10/278,248, entitled "Mixing and Delivery of Therapeutic Compositions" and filed on October 23, 2002, hereby incorporated by reference in its entirety. Also, this application is related to U.S. Application Serial No. _____ [Attorney Docket No. 01194-823001], filed on the same day as this application.

TECHNICAL FIELD

The invention relates to embolic compositions.

BACKGROUND

Embolic compositions can be used to prevent or to treat certain conditions in the body. For example, in therapeutic vascular occlusions (sometimes called "embolizations"), particulate embolic compositions can be used to block, or occlude, vessels in the body. The embolic compositions can be used to block microvascular supplies of blood to tumors (thereby depriving the tumors of resources to grow), or to block hemorrhagic conditions in the body (thereby reducing or stopping bleeding). The compositions can be delivered to a target site using a catheter that has been introduced into the vessel.

SUMMARY

In one aspect, the invention features an embolic composition including a first collection of particles having a first common shape, and a second collection of particles having a second common shape different than the first common shape.

Embodiments may include one or more of the following features. The first common shape is substantially free of a concave region. The first common shape is substantially spherical. The second common shape is flake-like or strand-like. The second common shape includes a generally convex region. The second common shape includes an element extending from a non-fibrous base. The particles in the first collection and the particles in the second

collection have different compositions. The first collection includes more particles than the second collection.

Alternatively or in addition, embodiments may include one or more of the following features. The particles of at least one of the collections can include a radiopaque material. The particles of at least one of the collections can include a portion capable of dissolving in a body. The particles of at least one of the collections can include a shape memory material and a non-shape memory material. The first collection of particles can include a shape memory material, and the second collection of particles includes a non-shape memory material. The particles of the first collection can be spherical, and the particles of the second collection can be non-spherical. The particles of the first and second collections can have different hardness. The particles of at least one of the collections can include a material capable of increasing in volume upon exposure to a predetermined stimulus. The first and second collections can be configured engage with each other. The first and second collections of particles can have different sizes. The first collection includes particles having a shape memory material.

The particles of at least one of the collections can include a therapeutic agent. The particles of only one collection can include the therapeutic agent. The particles in the first collection can include a first therapeutic agent, and the particles in the second collection can include a second therapeutic agent different than the first therapeutic agent. The particles of at least one of the collections can define a cavity, and include a therapeutic agent in the cavity.

In another aspect, the invention features an embolic composition including a first collection of particles having a first collection characteristic of shape or composition, and a second collection of particles having a second collection characteristic of shape or composition, wherein the first collection characteristic is different from the second collection characteristic.

Embodiments may include one or more of the following features. The first collection characteristic is the shape of the particles in the first collection. The second collection characteristic is the shape of the particles in the second collection. The particles in the first collection include a generally concave region. The particles in the second collection are substantially free of concave regions.

In another aspect, the invention features a kit including a first collection of particles having a first common shape, and a second collection of particles unblended with the first

collection, the second collection having a second common shape different than the first common shape. The kit can further include a syringe and/or a catheter sized for insertion into a body.

In another aspect, the invention features a composition including a first embolic agent of a first phase, and a second embolic agent of a second phase different than the first phase. The first embolic agent can include solid embolic particles, a liquid, a gel, or a foam.

In another aspect, the invention features a method including introducing a first collection of particles having a first common shape into a body, and introducing a second collection of particles having a second common shape different than the first common shape into the body, the first and second collections occluding a site in the body.

Embodiments may include one or more of the following features. The collections are introduced into the body substantially simultaneously or sequentially. The collections are introduced from a catheter comprising two lumens, e.g., coaxial lumens. The method further includes exposing at least one collection of particles to a change in energy, e.g., temperature. The method further includes exposing at least one collection of particles to a predetermined material delivered through a catheter. The predetermined material is capable of changing the volume or shape of at least one collection of particles.

Other aspects, features and advantages of the invention will be apparent from the description of the preferred embodiments and from the claims.

DESCRIPTION OF DRAWINGS

Fig. 1 is an illustration of an embodiment of an embolization kit.

Figs. 2A, 2B, 2C, 2D, and 2E illustrate an embodiment of a method of delivering an embolic composition.

Figs. 3A, 3B, and 3C illustrate an embodiment of a method of delivering an embolic composition.

Fig. 4A is an illustration of an embodiment of an occlusion; and Fig. 4B is an illustration of two embolic particles interlocking.

Fig. 5 is an illustration of an embodiment of an occlusion.

Fig. 6 is an illustration of an embodiment of an occlusion.

Fig. 7 is an illustration of two embolic particles having complementary features.

Figs. 8A and 8B are illustrations of embodiments of embolic particles having teardrop shapes.

Figs. 9A, 9B, and 9C are illustrations of embodiments of occlusions.

Fig. 10 is an illustration of an embodiment of an embolic particle having a cavity.

5 Fig. 11A is an illustration of an embodiment of a catheter; and Fig. 11B is a cross-sectional view of the catheter of Fig. 11A, taken along line 11B-11B.

Fig. 12A is an illustration of an embodiment of a catheter; and Fig. 12B is a cross-sectional view of the catheter of Fig. 12A, taken along line 12B-12B.

10 Fig. 13A is an illustration of an embodiment of an embolic particle having a slot; and Fig. 13B is an illustration of two particles of Fig. 13A interlocking.

Fig. 14 is an illustration of an embodiment of an embolic particle having enlarged portions.

Fig. 15 is an illustration of an embodiment of an embolic particle having ridges.

15 Fig. 16 is an illustration of an embodiment of an embolic particle having a cross section with vertices.

Fig. 17 is an illustration of an embodiment of an embolic particle having a slot.

Fig. 18A is an illustration of an embodiment of a ribbon-like embolic particle; and Fig. 18B is an illustration of an embodiment of a sheet-like embolic particle.

Fig. 19 is an illustration of an embodiment of an embolic particle having fibers.

20 Figs. 20A, 20B, 20C, 20D, 20E, and 20F are illustrations of embodiments of embolic particles having various projections.

Fig. 21A is a top view of an embodiment of an oblate embolic particle; Fig. 21B is a side view of the particle of Fig. 21A; and Fig. 21C shows the particle of Fig. 21A in a flexed position.

Figs. 22A and 22B are illustrations of an embodiment of a star-shaped embolic particle.

25 Fig. 23A is an illustration of an embodiment of an embolic particle having a slot; Fig. 23B is an illustration of an embodiment of a gear-shaped embolic particle; and Fig. 23C is an illustration of an embodiment of an embolic particle.

Figs. 24A, 24B, and 24C illustrate an embodiment of a method of delivering an embolic composition.

DETAILED DESCRIPTION

Referring to Fig. 1, an embolization kit 20 includes a first embolic composition 21, a second embolic composition 23, a syringe 25, and a catheter 27 that is sized to be delivered to a body vessel. First embolic composition 21 includes a collection of embolic particles 29 (as shown, spherical particles) contained in a vessel 31 with a suitable carrier 33, such as saline. Second embolic composition 23 includes a collection of differently shaped embolic particles 35 (as shown, flake-like particles) contained in a vessel 37 with a suitable carrier 39. Spherical embolic particles are described, for example, in U.S.S.N. 10/215,594, filed August 9, 2002, and are available as Contour SE™ Microspheres (polyvinyl alcohol (PVA) particles); and suitable flake-like embolic particles are available as Contour™ (irregularly shaped PVA particles), both available from Boston Scientific Corp., Natick, MA. Syringe 25 and catheter 27 are used to deliver particles 29 and 35 from their respective vessels 31 and 37 to a target site in a body. Suitable syringes are described in, for example, U.S.S.N. 10/278,248.

During use, particles 29 and 35 can be delivered to the body in a predetermined sequence or simultaneously. For example, referring to Figs. 2A-2E, using syringe 25 spherical particles 29 are delivered through catheter 27, which has been emplaced in a body vessel 26. After particles 29 are released from catheter 27, the particles flow within vessel 26, aggregate, and block the vessel (Fig. 2C), thereby depriving a tumor or reducing hemorrhaging, for example.

Subsequently, flake-like particles 35 are delivered through and released from catheter 27. Particles 35 can flow toward spherical particles 29 and fill or block any voids defined by the spherical particles, thereby enhancing embolization. In other embodiments, referring to Figs. 3A-3C, collections of particles having different shapes (e.g., as described below) can be delivered simultaneously. As shown, particles 22 having rod-like shapes, star-like shapes, and spherical shapes are delivered at the same time. The differently shaped particles are capable of interacting synergistically (e.g., by engaging or interlocking) to form a well-packed occlusion, thereby enhancing embolization.

Other mixtures or combinations of different embolic particles can be used. For example, referring to Fig. 4A, three-dimensional particles 41, such as spheres and/or cylinders, can be introduced (before, after, or simultaneously) with two-dimensional particles 43, such as elongated, ribbon-like particles or flat particles. When the particles interact and aggregate, the

ribbons or flat particles can fill the voids between the spheres, thereby providing a more effective occlusion. As another example, referring to Fig. 4B, ribbon-like particles 43 can be delivered with particles 45 having slots. The ribbon-like particles can interact (e.g., engage with or interlock with) the slots, thereby self-assembling to a more solid structure.

5 Alternatively or in addition, collections of particles of different sizes can be used together (e.g., sequentially or simultaneously). Referring to Fig. 5, relatively large particles 47 can be used to provide the general structure of an occlusion, while the smaller particles 49 can occupy the spaces between the large particles. The large and small particles can be delivered simultaneously or sequentially. For example, relatively large particles can be delivered first to
10 form the general structure an occlusion, and relative small particles can subsequently be delivered to fill any spaces between the large particles.

 Other combinations including particles with complementary (e.g., interlocking) shapes are possible. For example, referring to Fig. 6, spherical particles 41 can be delivered with particles 51 having concave portions (e.g., oblate particles 52 described below) that receive
15 portions of the spherical particles. Particles 51 are capable of filling voids between spherical particles 41. Other complementary particles capable of interlocking include particles 53 with openings 55, and particles 57 having a portion 59 (e.g., a projection) capable of penetrating the opening (Fig. 7). Other complementary particles 61 include those with teardrop shapes (Figs. 8A and 8B) having a relatively small portion that extends curvilinearly to a relatively large portion.
20 The particles can form relatively flat, two-dimensional structures, or three-dimensional structures (e.g., two particles can engage to form a sphere). In other embodiments, complementary particles have one or more surfaces that are relatively flat, i.e., planar. For example, the particles can be cubic or icosahedral particles . Referring to Figs. 9A-9C, particles having flat surfaces can form occlusions by stacking like blocks in which the flat surfaces contact each other. The
25 particles can be of similar or same size (e.g., Fig. 9B and 9C) or different size (e.g., Fig. 9A).

 Alternatively or in addition, collections of particles having different physical and/or chemical properties can be used together(e.g., sequentially or simultaneously). For example, particles having different hardness (e.g., durometer) can be used together.

 Collections of particles having different surface properties can be delivered together(e.g.,
30 sequentially or simultaneously). For example, hydrophobic particles can be surface modified with a dissolvable hydrophilic coating, and introduced together with unmodified hydrophobic

particles. Since the modified and unmodified particles have different hydrophobicity/hydrophilicity, the particles tend not to aggregate. When the hydrophilic coating dissolves in the body to expose the hydrophobic surface, the particles can aggregate to form an occlusion. The particles can include a coating of a lubricious material, such as Glidex®, Mediglide® (silicone-based coatings), or Hydropass™ (water-based coatings) that enhance delivery of the particles (e.g., by preventing premature aggregation). The particles can include a coating of a material that changes upon exposure to a predetermined condition. For example, the coating material can include a hydrogel, alginate, or a starch that swells upon contact with a liquid, a change in temperature, and/or a change in pH. The soft, swollen coating can help the particles to easily deform and provide tight packing. The coating material can be soluble material, such as one that can dissolve in bodily fluids (described below) or another fluid subsequently delivered through the catheter. The soluble material can retard the transition of the shape memory material, for example, by acting as a thermal barrier. In embodiments in which the embolic particles include an absorbable material, the soluble material can delay absorption. An absorbable or bio-absorbable material is capable of dissolving upon exposure to bodily fluid at a known rate. Polymer coating materials which can be used as a bio-absorbable coating include gelatin; polylactic acid (e.g., poly-L-lactic acid, blends of DL-lactic acid, or poly(lactic acid-co-glycolic acid); polyglycolic acid; polysaccharides such as celluloses (e.g., hydroxymethylpropylcellulose), starches, dextrans, alginates and derivatives; and chlorhexidine gluconate, among others. The bio-absorbable coating thickness can be varied to regulate the amount of absorption, the type of bio-absorbable coating thickness can be varied to regulate the amount of absorption, and the type of bio-absorbable coating can be selected to absorb certain predetermined fluids, such as blood. The bio-absorbable material can also act as a matrix that encourages cell growth into an embolized vessel.

Other materials can be used. Suitable materials include, for example, polycarboxylic acids, cellulosic polymers, including cellulose acetate and cellulose nitrate, polyvinylpyrrolidone, cross-linked polyvinylpyrrolidone, polyanhydrides including maleic anhydride polymers, polyamides, polyvinyl alcohols, copolymers of vinyl monomers such as EVA, polyvinyl ethers, polyvinyl aromatics, polyethylene oxides, glycosaminoglycans, polyesters including polyethylene terephthalate, polyacrylamides, polyethers, polyether sulfone, polycarbonate, polyalkylenes including polypropylene, polyethylene and high molecular weight

polyethylene, halogenated polyalkylenes including polytetrafluoroethylene, polyurethanes, polyorthoesters, proteins, polypeptides, silicones, siloxane polymers, polycaprolactone, polyhydroxybutyrate, polyhydroxybutyrate valerate and blends and copolymers thereof as well as other biodegradable, bioabsorbable and biostable polymers and copolymers. Coatings from polymer dispersions such as polyurethane dispersions (BAYHDROL®, etc.) and acrylic latex dispersions are also within the scope of the present invention. The polymer may be a protein polymer, fibrin, collagen, and derivatives thereof, an extracellular matrix component, hyaluronic acid, chitosan, or another biologic agent or a suitable mixture of any of these. Other examples include polyacrylic acid, available as HYDROPLUS® (Boston Scientific Corporation, Natick, Mass.), and described in U.S. Pat. No. 5,091,205; polyisocyanates (e.g., such that the particles can become instantly lubricious when exposed to body fluids, see, for example, U.S. Patent No. 5,091,205); polycaprolactone (e.g., a copolymer of polylactic acid and polycaprolactone, or copolymer of polycaprolactone and butylacrylate); tyrosine-derived polycarbonates and arylates; polyphosphazenes; polyiminocarbonates; polydimethyltrimethylcarbonates; biodegradable calcium phosphates (e.g., zinc calcium phosphates); cyanoacrylates; polydioxanone; polypropylene fumarate; polydepsipeptides; maleic anhydride copolymers; and anhydrous polyanhydrides.

In embodiments, collections of particles can include different therapeutic agents. The therapeutic agents can be released upon contact with bodily fluids. The soluble material described above can be used to control the release of the therapeutic agents. The agents can be negatively charged, cationically charged, amphoteric, or neutral. The therapeutic agents can be formed in the bulk of the particles or applied to the surfaces of the particles. For example, the surface of the particles can be textured, e.g., roughened. The textured surface can increase the surface area of the particles, thereby allowing more materials, such as a therapeutic agent, to be applied to the surface. The textured surface can provide pits or craters in which coating materials can be placed. Techniques for creating a textured surface include micrograzing, cryogenic pulverization, and/or microcracking.

Some examples of therapeutic agents are described in U.S.S.N. 10/232,265, filed August 30, 2002, hereby incorporated by reference. Examples of other therapeutic agents include, but are not limited to, anti-thrombogenic agents such as heparin, heparin derivatives, urokinase, and PPACK (dextrophenylalanine proline arginine chloromethylketone); anti-proliferative agents such

as enoxaprin, angiopeptin, or monoclonal antibodies capable of blocking smooth muscle cell proliferation, hirudin, and acetylsalicylic acid; anti-inflammatory agents such as dexamethasone, prednisolone, corticosterone, budesonide, estrogen, sulfasalazine, and mesalamine; anti-cancer agents or antineoplastic/antiproliferative/anti-miotic agents such as paclitaxel, 5-fluorouracil, cisplatin, vinblastine, vincristine, cladribine, epothilones, endostatin, angiostatin and thymidine kinase inhibitors; anesthetic agents such as lidocaine, bupivacaine, and ropivacaine; anti-coagulants such as D-Phe-Pro-Arg chloromethyl keton, an RGD peptide-containing compound, heparin, antithrombin compounds, platelet receptor antagonists, anti-thrombin anticodies, anti-platelet receptor antibodies, aspirin, prostaglandin inhibitors, platelet inhibitors and tick antiplatelet peptides; vascular cell growth promoters such as growth factor inhibitors, growth factor receptor antagonists, transcriptional activators, and translational promoters; vascular cell growth inhibitors such as growth factor inhibitors, growth factor receptor antagonists, transcriptional repressors, translational repressors, replication inhibitors, inhibitory antibodies, antibodies directed against growth factors, bifunctional molecules consisting of a growth factor and a cytotoxin, bifunctional molecules consisting of an antibody and a cytotoxin; cholesterol-lowering agents; vasodilating agents; and agents which interfere with endogenous vasoactive mechanisms.

In embodiments, collections of particles can include different diagnostic agents. For example, alternatively or in addition to the surface modification, the internal structure of the embolic particles can be modified. The embolic particles can surround (e.g., encapsulate) a mass including a radiopaque material, a material that is visible by magnetic resonance imaging (MRI), and/or an ultrasound contrast agent. The materials or agent allows the particles to be tracked and monitored, e.g., by X-ray fluoroscopy, MRI, or ultrasound imaging. The radiopaque material (e.g., powder), MRI-visible material, and/or ultrasound visible material can be mixed with the material of the embolic particles, e.g., shape memory polymer, and formed into the particles. In some cases, the radiopaque material, MRI-visible material, and/or ultrasound visible material can be applied to the surface of the particles, for example, by compounding with one or more of the coating materials described above. Alternatively or in addition, the radiopaque material can be a mass placed in the particles. Examples of radiopaque materials include high-density metals, such as tantalum, tungsten, platinum, palladium, or gold.

Examples of MRI visible materials include non-ferrous metal-alloys containing paramagnetic elements (e.g., dysprosium or gadolinium) such as terbium-dysprosium, dysprosium, and gadolinium; non-ferrous metallic bands coated with an oxide or a carbide layer of dysprosium or gadolinium (e.g., Dy_2O_3 or Gd_2O_3); non-ferrous metals (e.g., copper, silver, platinum, or gold) coated with a layer of superparamagnetic material, such as nanocrystalline Fe_3O_4 , $CoFe_2O_4$, $MnFe_2O_4$, or $MgFe_2O_4$; and nanocrystalline particles of the transition metal oxides (e.g., oxides of Fe, Co, Ni). Powder of MRI visible materials can be mixed with the material of the embolic particles, e.g., shape memory polymer.

The ultrasound contrast agent can be any material that enhances visibility during ultrasound imaging. An ultrasound contrast agent can include a suspension having trapped bubbles of sufficient size to deflect sound waves.

In other embodiments, referring to Fig. 10, an embolic particle 70 can be formed to define a cavity 72 in which a therapeutic agent can be placed and sealed. Cavity 72 can be sealed with a material that degrades or dissolves upon exposure to a predetermined condition, such as contact with bodily fluids, a change in pH, or a change in energy (e.g., temperature). When the sealant degrades or dissolves, the therapeutic agent can be released in the body. Suitable materials for sealing cavity 72 include polyvinyl alcohol (which dissolves in a solution having a selected pH, e.g., about >7.4), polyvinyl acetates, vinyl or collagen based glues or gelatins, and other degradable materials described above and in Buscemi et al., U.S. Patent No. 5,443,495, hereby incorporated by reference. Embolic particle 70 can include a shape memory material and/or a non-shape memory material.

The embolic particles can be delivered with agents in different physical states. For example, the embolic particles can be delivered using a contrast agent (such as Omnipaque™ Renocal®) or a radiopaque agent so that the delivery of the particles can be tracked. In embodiments in which the particles can absorb liquids, absorption of the contrast agent allows the particles to be monitored, e.g., after occlusion. The embolic particles can be delivered with liquid embolic materials (such as n-butyl cyanoacrylates (NBCA)), foam embolic materials (such as Ivalon® (PVA foam)), and/or gel embolics materials (such as hydrogels). NBCA is capable of polymerizing when contacted with an ionic substance, such as blood, saline ionic contrast media, and vessel epithelium. Polymerization time can be altered (e.g., prolonged) by adding varying amounts of glacial acetic acid and/or oil-based contrast agents, e.g., ethiodol or

pantopaque. Other compositions capable of being introduced into the body as a liquid from which a solid thereafter precipitates are described in U.S. Patent No. 6,575,896 and exemplified by Enteryx® (available from Boston Scientific Corp., Natick, MA). An example of a composition includes a biocompatible solvent (e.g., DMSO), a biocompatible polymer (e.g., cellulose acetate), and a contrast agent (e.g., barium sulfate). Other materials capable of solidifying in vivo include those used in polymer endoluminal paving and sealing (PEPS), described, for example, in U.S. Patent No. 6,443,941. Still other examples include inorganic gels and other materials described in U.S. Patent No. 6,296,632.

The embolic particles can be used with hemostatic agents. Agents include Gelfoam® (a gelatin sponge available from Upjohn Co., Kalamazoo, MI) and Avitene® (a microfibrillar collagen (e.g., 40-60 micron particles) available from Avicon Inc., Fort Worth, TX). Other examples include fibrin, fibrin glue, blood clotting precursors, other collagen-based agents (e.g., Collastat™, Superstat™, and Instat™), cellulose (e.g., Oxycel™ and Surgicel™), calcium alginate, hyaluronic acid, platelets, thrombin, and cryoprecipitate. In some cases, clotting can be promoted by charging the embolic particles, e.g., their surfaces. Other examples include silk sutures and microcoils (which can be used to build a framework or a mesh on which the particles can accumulate and occlude); fibered stainless steel (e.g., from Gianturco); platinum microcoils with or without Dacron® fibers (available from E.I. du Pont de Nemours and Co., and Target Therapeutics Boston Scientific); Guglielmi detachable coils (long, non-fibered platinum microcoils (available from Target Therapeutics Boston Scientific); and interlocking detachable coils. Alternatively or in addition, embolic therapy can include adding a vasospastic agent (such as serotonin and oxyhemoglobin) to constrict a blood vessel locally and to cause local occlusion and/or thrombus.

Mixtures of embolic particles can be delivered using a multi-lumen catheter and/or syringe. For example, referring to Figs. 11A and 11B, a catheter 101 includes two lumens 103 and 105 separated by a wall 107. Wall 107 terminates proximally of the distal tip 109 of catheter 101, so at the distal tip, the catheter has a mixing chamber 111. During use, one type of embolic particles can be delivered through lumen 103, and another type of embolic particles can be delivered through lumen 105. Lumens 103 and 105 keep the particles separated so that, for example, they do not prematurely interact (e.g., aggregate or clog) inside catheter 101. The particles can then mix in chamber 111 before they are introduced into the body. In other

embodiments, wall 107 terminates at distal tip 109, i.e., the catheter does not include a mixing chamber. Lumens 103 and 105 can be formed coaxially (Figs. 12A and 12B), vis-à-vis, side-by-side, with or without a mixing chamber. The multi-lumen catheter or syringe can include more than two lumens, depending, for example, on the number of types of embolic particles to be delivered.

As described above, the embolic particles are not limited to spherical or flake-like particles. In other embodiments, the particles are formed in a variety of shapes that enhance aggregation, and numerous embodiments of embolic compositions and methods of delivering the compositions are possible. Any of the particles described herein can be used with any one or more other particle, in any combination.

In some embodiments, a collection of embolic particle includes particles having an elongated shape, as exemplified by the embodiments shown in Figs. 13A-17. That is, a particle has a length, L , that is greater than a width or diameter, W . The length, L , is the longest dimension of the particle, and can range from about 100 microns to about 1200 microns. For example, the length, L , can be greater than or equal to about 100, 200, 300, 400, 500, 600, 700, 800, 900, 1000, or 1100 microns; and/or less than or equal to about 1200, 1100, 1000, 900, 800, 700, 600, 500, 400, 300, or 200 microns. The width or diameter, W , is the average dimension taken along a plane transverse (e.g., orthogonal) to the direction of length, L . The width or diameter, W , can range from about 50 microns to about 1000 microns. For example, W can be greater than or equal to about 50, 100, 200, 300, 400, 500, 600, 700, 800, or 900 microns; and/or less than about 1000, 900, 800, 700, 600, 500, 400, 300, 200, or 100 microns. In some cases, the largest dimension of the particle is equal to or less than the smallest dimension of the instrument (e.g., microcatheter) used to deliver the particles.

Expressed another way, the embolic particle can have a length (L) to width/diameter (W) aspect ratio of greater than one. (A spherical particle would have a length to width aspect ratio of one.) In some embodiments, the particle has a length to width aspect ratio of from about 1.25:1 to about 10:1. For example, the aspect ratio can be greater than or equal to about 1.25:1, 2:1, 3:1, 4:1, 5:1, 6:1, 7:1, 8:1, or 9:1; and/or less than or equal to about 10:1, 9:1, 8:1, 7:1, 6:1, 5:1, 4:1, 3:1, or 2:1.

A collection of particles can include elongated particle having different shapes. For example, Figs. 13A, 14, and 15 show different embodiments of elongated particles having a

generally tubular shape. Fig. 13A shows an embolic particle 32 in the shape of a cylinder having a slot or a groove 34 extending along the length of the particle. As described below, in embodiments in which particle 32 includes a shape memory material, slot 34 allows particle 32 to be more easily compacted, e.g., for delivery, and facilitates interaction between the particles, e.g., by allowing the slots to engage (e.g., interlock) with each other and the particles to self-assemble (Fig. 13B). Slot 34 can extend the entire length of particle 32, or only a portion thereof. Particle 32 can include multiple slots 34, for example, the slots can be arranged collinearly along the particle, and/or distributed (symmetrically or asymmetrically) around the circumference of the particle. In some embodiments, particle 32 does not include slot 34, i.e., the particle can be a conventional cylinder.

Fig. 14 shows an embolic particle 36 in the shape of a cylinder having enlarged portions 38. In use, enlarged portions 38 help particles 36 to engage or mate with each other, thereby enhancing aggregation, e.g., by providing a more closely packed mass. Portions 38 are generally curvilinear or rounded portions having a diameter greater than the diameter of other portions of particle 36. In some embodiments, enlarged portions 38 have a maximum diameter of about 1,500 microns (e.g., less than about 1,200, 1,000, 800, 600, or 400 microns). Particle 36 can include one or more enlarged portions 38.

Fig. 15 shows an embolic particle 40 in the shape of cylinder having a plurality of ridges 42 extending along the length of the particle. As with slot 34 and enlarged portions 38, ridges 42 can help particles 40 engage or lock with each other during use. Ridges 42 can extend the entire length of particle 40, or only a portion thereof. Ridges 42 can be symmetrically or asymmetrically formed about the circumference of particle 40. In some embodiments, ridges 42 have a maximum height, H, of about 100 microns (e.g., less than about 100, 80, 60, or 40 microns), and a base width, X, of about 50 microns. Ridges 42 can have different cross-sectional shapes, such as square, rectangular, or triangular.

Indeed, as shown in Figs. 13A and 14-17, a collection of embolic particles can have a variety of cross-sectional shapes. For example, Figs. 13A and 14 show particles 32 and 36 having generally circular cross sections. Fig. 15 shows particle 40 having a generally gear-shaped cross section. Fig. 16 shows a star-shaped embolic particle 44 having a cross section with multiple (as shown, eight) vertices 46. In some embodiments, particle 44 can have one, two, three, four, five, six, seven, or more vertices 46, arranged symmetrically or asymmetrically

around the particle. As another example, Fig. 17 shows an embolic particle 48 having a triangular cross section and a slot 50. Particle 48 further illustrates that the embolic particles can have uniform or non-uniform thickness, i.e., the particles can change dimensions, e.g., taper, along a particular direction. Particle 48, along with particles 40 and 44, also illustrate that the outer surface of the particles can be faceted, vis-à-vis cylindrical or rod-like (e.g., Fig. 13A). In other embodiments, the embolic particles can have other cross sectional shapes, for example, other non-circular shapes, such as oval, elliptical, or regularly or irregularly polygonal having 3, 4, 5, 6, 7, or 8 or more sides.

The embolic particles shown in Figs. 13A and 14-17 also exemplify a class of embolic particles that can be characterized as having an element of symmetry. In comparison, a mass having a random shape typically does not include an element of symmetry. An example of an element of symmetry is a mirror plane, in which the structure of the particle is identical at corresponding, mirror-imaged locations on both sides of the plane. For example, particles 32 and 48 have a mirror plane (m) extending through the middle of slots 34 and 50, respectively (Figs. 13A and 17). Particle 36 has an infinite number of mirror planes extending along the length of the particle and intersecting the cross-sectional center, C (Fig. 14). Particle 44 has numerous mirror planes, for example, extending along the length of the particle and intersecting the middle of a vertex 46, respectively (Fig. 16). Another example of an element of symmetry is an axis of symmetry about which rotation at selected (but not 360°) intervals yields the identical orientation. For example, particle 36 has an axis of symmetry, R, extending through the cross-sectional center about which rotation in any increment would yield the identical orientation (Fig. 14). Particle 44 also has an axis of symmetry, R, extending through the cross-sectional center about which rotation in 45° increments would yield the identical orientation (Fig. 16). Particles 32 and 48 have an axis of symmetry, R, about which rotation in 180 degrees increments would yield the identical orientation.

In addition, while the particles described above include certain discrete features (such as a slot, an enlarged portion, or a ridge), in some embodiments, an embolic particle can include multiple features, in any combination. For example, particle 36 with enlarged portions 38 can further include one or more slots and/or one or more ridges. Star-shaped particle 44 can include one or more slots and/or one or more enlarged portions. Wedged-shaped particle 48 may not

include a slot, but can include, for example, one or more ridges. Any combination of features can be used to enhance interaction among the particles during use.

The particles in a collection of particles are also not limited to the relatively three-dimensional structures shown in Figs. 13A and 14-17. In some embodiments, the embolic particles can be relatively two-dimensional. That is, the embolic particles can have a very small thickness. Referring to Figs. 18A and 18B, in some cases, the particles are ribbon-like (particle 71) or sheet-like (particle 73). In embodiments in which the particles include a shape memory material, the flat morphology of the particles allows them to be initially compacted (e.g., folded) to facilitate delivery, and subsequently expanded (e.g., unfolded) upon exposure to a stimulus, as described below. In some embodiments, particles 71 or 73 have a thickness (T) less than about 50 microns (e.g., less than about 40, 30, or 20 microns). Alternatively or in addition, particles 71 or 73 have a thickness (T) to width (W) ratio of between about 1.25:1 and about 10:1. For example, the aspect ratio can be greater than or equal to about 1.25:1, 2:1, 3:1, 4:1, 5:1, 6:1, 7:1, 8:1, or 9:1; and/or less than or equal to about 10:1, 9:1, 8:1, 7:1, 6:1, 5:1, 4:1, 3:1, or 2:1. The length (L) of particles 71 and 73 can be as described above.

In some embodiments, a collection of embolic particles includes particles that are not substantially elongated. The particles can be generally spherical (e.g., completely spherical or egg-shaped) embolic particles (e.g., particles 56 and 58 shown in Figs. 19 and 20A, described below). In embodiments in which the particles include a shape memory material, the generally spherical particles can be compacted to a generally oblate shape for delivery. Subsequently, the particles can be exposed to a stimulus (described below) that enlarges the particles, e.g., to the egg-shaped or spherical particles. Suitable dimensions for spherical embolic particles range from about one microns to about 1500 microns in diameter, and are described in U.S.S.N. 09/519,263, filed March 6, 2000, hereby incorporated by reference.

In other embodiments, the particles have a form that is generally oblate, e.g., like a red blood cell. Referring to Figs. 21A-21B, an oblate particle 52 has a generally round or oval cross section and a relatively flat profile. The surface of particle 52 is generally curvilinear. At its central portion 53, the particle can be depressed, such that the central portion is narrowed, and the perimeter 55 of the particle is thicker than the central portion. As a result, particle 52 is concave at central portion 53, and convex at its perimeter 55. The oblate shape allows particle 52 to easily flex (Fig. 21C) so that the particle can be easily delivered, e.g., flow through a

catheter without aggregating. In some embodiments, particle 52 can have a width (W) of about 50 to about 1200 microns (e.g., greater than or equal to about 50, 200, 400, 600, 800, or 1000 microns; and/or less than or equal to about 1200, 1000, 800, 600, 400, or 200 microns), a maximum thickness (T_{\max}) of about 1000 to about 1200 microns (e.g., greater than or equal to about 1000 or 1100 microns; and/or less than or equal to about 1200 or 1100), and a minimum thickness (T_{\min}) of about 100 to about 200 microns (e.g., greater than or equal to about 100 or 150 microns; and/or less than or equal to about 200 or 150 microns). In other embodiments, central portion 53 is not depressed, e.g., the thickness of the oblate particle is generally constant.

Still other relatively non-elongated forms are possible. Figs. 22A and 22B show a non-elongated embolic particle 54 having the generally star-shaped cross-section of particle 44, but without the extended length. The relatively short length can be less than about 100 microns (e.g., less than about 90, 80, 70, 60, 50, 40, 30, 20, or 10 microns). The cross-sectional shape of particle 54 can be modified similarly to the cross-sectional shape of particle 44. Similarly, particles 32, 40, and 48 (Figs. 13A, 15, and 17) can be formed having the same cross-sections but without the extend lengths. Figs. 23A, 23B, and 23C respectively show truncated embodiments of particle 32, particle 40, and particle 48 (without a slot).

A collection of particles (e.g., the particles shown in Figs. 13A and 14-23C) can be formed wholly or in part of a biocompatible material. The performance of the particles can be enhanced by the particular set shape or shapes described herein. An example of a suitable material is a biocompatible polymer, such as polyvinyl alcohol (PVA) described in U.S.S.N. 10/215,594, filed August 9, 2002. Other suitable materials include biocompatible ceramics, such as silica particles, described in U.S. Patent No. 4,640,807 and EPO 067459, hereby incorporated by reference. Another type of material is an absorbable polymer. An absorbable polymer is a porous material that can absorb another material, such as a body fluid or a biocompatible agent, and expand from an initial (e.g., compacted) shape to a second (e.g., expanded) shape. Examples of absorbable polymers include hyaluronic acid (Medtronic® Xomed™, Inc., MN) and hydrogels. In some cases, the biocompatible material does not exhibit shape memory characteristics ("a non-shape memory material").

Mixtures of materials can be used to make the particles. For example, a particle can include a core made of a polymer, such as PVA, and an outer surface made of a ceramic, such as silica. The porous outer surface can be used to store materials, such as a radiopaque material or

an MRI-visible material, and/or to release a material, such as a therapeutic agent. In other embodiments, the core includes a ceramic, and a polymer coating surrounds the core. The polymer can respond (e.g., changes shape) during use as described above.

As described above, in some embodiments, the embolic particles can include a shape memory material, which is capable of being configured to remember, e.g., to change to, a predetermined configuration or shape. The shape memory material is capable of transitioning between states and shapes based on exposure to environmental conditions, such as temperature, pH, or energy input, e.g., electromagnetic radiation. During delivery, the particles can be in the first state and can have a compacted shape that provides flowability to avoid clogging or aggregation, e.g., in the catheter. After the particles are released from the catheter, the particles are transitioned to the second state to form a second shape, such as an enlarged, non-compacted shape. The particles, in their second shape, then flow within the vessel, aggregate, and block the vessel. The shape memory material can provide a permanent occlusion, i.e., the occlusion is not substantially absorbed by the body and/or is not intended to be removed from the body. The particles can be formed at least in part or wholly of a shape memory material. Particles including a shape memory material can be used with particles that do not include a shape memory material.

The shape memory material can be, for example, a polymer or an alloy. Suitable shape memory polymers include elastomers that exhibit melt or glass transitions at temperatures that are above body temperature, e.g., at about 40 to 50 °C, and safe for use in the body. Examples of polymers include shape memory polyurethanes (available from Mitsubishi), polynorbornene (e.g., Norsorex™ (Mitsubishi)), polymethylmethacrylate (PMMA), poly(vinyl chloride), polyethylene (e.g., crystalline polyethylene), polyisoprene (e.g., trans-polyisoprene), styrene-butadiene copolymer, rubbers, or photocrosslinkable polymer including azo-dye, zwitterionic and other photochromic materials (as described in Shape Memory Materials, Otsuka and Wayman, Cambridge University Press, 1998). Other shape memory polymers include shape memory plastics available from MnemoScience GmbH Pauwelsstrasse 19, D-52074 Aachen, Germany. Mixtures of polymeric shape memory materials can be used.

In some embodiments, the shape memory polymer is crosslinked and/or crystalline. The degree of crosslinking and/or crystallinity is sufficient to resist excessive creep or stress relaxation, e.g., after the polymer is heated. Crosslinking can also be controlled to adjust the melt or glass transition temperature and transition temperature range. In some cases, a narrow

transition range, e.g. 10 °C, 5 °C, or less, is desirable. Crosslinking can be achieved by application of radiation, such as e-beam, UV, gamma, x-ray radiation, or by heat-activated chemical crosslinking techniques (e.g., with peroxides). In some radiation crosslinking techniques, the polymer need not be substantially heated to achieve crosslinking.

5 In some embodiments, the shape memory polymer is formed or set to a primary (e.g., stress free) shape during crosslinking. For example, an embolic particle can be crosslinked in a final shape. Subsequently, the polymer can be formed into a temporary shape, for example, by heating the polymer to a softening point (e.g., T_m or T_g), deforming (e.g., compacting) the polymer, and cooling the polymer to below a softening point. When the polymer is subsequently
10 heated to above the softening temperature, the polymer can recover to its primary form.

The shape memory material can be an alloy, such as a superelastic or pseudo-elastic metal alloy. An example of a superelastic materials include Nitinol™ (e.g., 55% nickel, 45% titanium), which can be heated and formed from a first shape to a second shape. When the Nitinol™ material is cooled, the material stays in the second shape. Subsequently, if the material
15 is heated to a predetermined transition temperature, the material can transition to the first shape. Other examples of superelastic materials include silver-cadmium (Ag-Cd), gold-cadmium (Au-Cd), gold-copper-zinc (Au-Cu-Zn), copper-aluminum-nickel (Cu-Al-Ni), copper-gold-zinc (Cu-Au-Zn), copper-zinc/(Cu-Zn), copper-zinc-aluminum (Cu-Zn-Al), copper-zinc-tin (Cu-Zn-Sn), copper-zinc-xenon (Cu-Zn-Xe), iron beryllium (Fe_3Be), iron platinum (Fe_3Pt), indium-thallium
20 (In-Tl), iron-manganese (Fe-Mn), nickel-titanium-vanadium (Ni-Ti-V), iron-nickel-titanium-Cobalt (Fe-Ni-Ti-Co) and copper-tin (Cu-Sn). See, e.g., Schetsky, L. McDonald, "Shape Memory Alloys", Encyclopedia of Chemical Technology (3rd ed.), John Wiley & Sons, 1982, vol. 20. pp. 726-736 for a full discussion of superelastic alloys. The shape memory alloy can be coated with a polymer, which may or may not have shape memory properties.

25 Mixtures of shape memory materials can be used to make a particle. For example, a particle can include a relatively hard core (e.g., made of Nitinol™) and a relatively soft outer surface (e.g., made of a polymer). The soft outer surfaces allow the particles to deform slightly, thereby enhancing packing when the particles aggregate.

A variety of techniques can be used to form the embolic particles. Examples of suitable
30 techniques include microelectromechanical (MEM) techniques, micromachining, nanomachining, nanoetching, and/or nanoassembly. The particles can be formed by extrusion

(e.g., of elongated particles), molding, and/or by stamping a sheet of shape memory material (e.g., having a thickness equal to the length of the particles).

The particles can be sterilized by a low temperature technique such as electron-beam irradiation, and packaged, e.g., about 1 to 5 ml of particles in about 5 to 10 ml saline. In
5 embodiments, electron beam irradiation can be used to pharmaceutically sterilize the particles to reduce bioburden. In e-beam sterilization, an electron beam is accelerated using magnetic and electric fields, and focused into a beam of energy. This resultant beam can be scanned by means of an electromagnet to produce a "curtain" of accelerated electrons. The accelerated electron
10 beam penetrates the collection of embolic particles to confer upon them electrons that destroy bacteria and mold to sterilize and reduce the bioburden in the embolic particles. Electron beam sterilization can be carried out by sterilization vendors such as Titan Scan, Lima, Ohio.

In use, the embolic particles can be delivered to an intended site by, for example, passing the particles through a catheter emplaced near the intended site. In embodiments in which the particles include a shape memory material, the particles are typically carried by a biocompatible
15 solution having a temperature less than the transition temperature to inhibit the shape memory material from transitioning.

The particles can be selectively transitioned from a first state to the second state by exposing the particles to a predetermined stimulus or trigger. The transition of the shape memory material from its temporary configuration to its final configuration can be effected, for
20 example, using a catheter carrying a heating device, such as a resistive heater or radiofrequency (RF) heater provided in the interior of the catheter. Alternatively or in addition, the shape memory material can be compounded to include a material, such as magnetic particles, that is susceptible to heating by magnetic effects, such as hysteresis effects. A magnetic field can be imposed on the particles by a source on a catheter or outside the body. Suitable magnetic
25 particles are available as the Smartbond™ System from Triton Systems, Inc., Chelmsford, MA. Heating by magnetic effects is discussed in U.S. Patent No. 6,056,844, hereby incorporated by reference. Other methods for effecting the transition of the shape memory material include introducing an interactive or reactive material, such as a fluid through the catheter, into the body after the particles are released from the catheter. For example, the fluid can be heated to the
30 transition temperature (e.g., about 30-60 °C) and/or have a predetermined pH to effect the transition. In other embodiments, a change in energy (e.g., temperature) can be produced by

passing an optic fiber through the catheter to deliver optical energy, such ultraviolet or infrared radiation.

In other embodiments, a collection of embolic particles can be formed of a combination of a shape memory material and a non-shape memory material. For example, referring again to Fig. 19, particle 56 can include a generally spherical body 60 made of a non-shape memory material, and a plurality of fibers or filaments 62 made of a shape memory material extending from the surface of the body. In some cases, fibers 62 are formed such that the fibers have a free end exposed (as shown in Fig. 19); in other cases, the ends of the fibers are embedded in body 60 such that the fibers form a loop extending from the body. Since fibers 62 are made of a shape memory material, particle 56 can be compacted by folding the fibers to body 60 during delivery of the embolic composition, thereby enhancing delivery. Subsequently, fibers 62 can be unfolded in the body so that particles 56 can interact (e.g., tangle) with other and aggregate. In other embodiments, body 60 includes a shape memory material and fibers 62 include a non-shape memory material. The non-shape memory material can be as described above and can further include synthetic materials, such as polyester, nylon, DACRON®, PTFE, polypropylene, Kevlar®, natural materials, such as silk, collagen, or hair; alginate; or suture-based materials. Particle 56 can be formed wholly of a shape memory material or a non-shape memory material.

As another example, referring again to Fig. 20A, particle 58 includes a generally spherical body 64 and a plurality of spikes 66 (not drawn to scale) extending from the body. Body 64 can be formed of a non-shape memory material, and spikes 66 can be formed of a shape memory material. Like fibers 62, during use, spikes 66 can be folded and subsequently unfolded. Spikes 66 can have a length of about 100 microns. In other embodiments, body 64 is formed of a shape memory material, and spikes 66 are formed of a non-shape memory material. Particle 58 can be formed wholly of a shape memory material or a non-shape memory material. In other embodiments, projections other than spikes 66 can be used. For example, the projections can include rods 121 (Fig. 20B), frustoconical projections 123 (Fig. 20C), or bumps 125 (Fig. 20D). The projections can be evenly or unevenly distributed about a particle. The projections can be formed, wholly or in selected portions, of any of the embodiments of particles described herein, such as particles 32, 36, 40, 44, 48, or 120 (Fig. 20E). Different types of projections (e.g., rods and bumps), in any combination, can be formed on a particle (e.g., Fig. 20F).

While the particles described herein can compose an embolic composition having a plurality of particles, in certain embodiments, an embolic composition includes only one particle. Referring to Figs. 24A-24C, an embolic particle 120 (as shown, an elongated cylindrical particle) can be delivered to target site 24 in vessel 26 using catheter 30. During delivery, particle 120 is in a first state (e.g., a compacted state) as it passes through catheter 30. After particle 120 is released from catheter 30, the particle is transformed to a second state (e.g., an expanded state), and in the second state, the particle travels through vessel 26 and occludes the vessel. Subsequently, smaller particles (e.g., as described herein) can be introduced to fill or block any voids between particle 120 and vessel 26. Alternatively or in addition, smaller particles (e.g., as described herein) can be introduced before particle 120 is delivered to provide additional occlusion. Specific dimensions of particle 120 can be a function of the vessel in which the particle is to be used. In some embodiments, particle 120 has a final, average cross sectional diameter of about one millimeter to about forty-six millimeters. The length of particle 120 can be about one micron to about 50 mm, e.g., between about 3 and about 25 mm. Particle 120 can be formed into any of the shapes described herein using the material(s) described herein.

The embolic particles can be used to embolize vascular malformations and tumors, for example as a preoperative procedure to reduce surgical morbidity and/or mortality related to excessive intraoperative blood loss. In these cases, occlusion of body vessels is typically temporary. In other cases, embolization is used as a definitive treatment, such as when the patient is not considered a good surgical candidate (e.g., because of poor health, previously unsuccessful surgical attempts, inaccessible surgical site, traumatic hemorrhagic conditions, and/or high surgical risk). In these cases, occlusion of vessels is typically permanent. For example, embolization of internal mammary arteries and lumbar arteries can be used in endovascular abdominal aortic aneurysm repairs to treat Type 2 endoleaks.

Furthermore, in other embodiments, the embolic compositions can be used as pharmaceutically acceptable compositions in the treatment of, for example, fibroids, tumors, internal bleeding, AVMs, hypervascular tumors, fillers for aneurysm sacs, endoleak sealants, arterial sealants, puncture sealants and occlusion of other lumens such as fallopian tubes. Fibroids can include uterine fibroids which grow within the uterine wall (intramural type), on the outside of the uterus (subserosal type), inside the uterine cavity (submucosal type), between the layers of broad ligament supporting the uterus (interligamentous type), attached to another organ

(parasitic type), or on a mushroom-like stalk (pedunculated type). Internal bleeding includes gastrointestinal, urinary, renal and varicose bleeding. AVMs are for example, abnormal collections of blood vessels, e.g. in the brain, which shunt blood from a high pressure artery to a low pressure vein, resulting in hypoxia and malnutrition of those regions from which the blood is diverted.

The magnitude of a therapeutic dose of the embolic composition can vary based on the nature, location and severity of the condition to be treated and the route of administration. A physician treating the condition, disease or disorder can determine effective amount of embolic composition. An effective amount of embolic composition refers to the amount sufficient to result in amelioration of symptoms or a prolongation of survival of the patient. The embolic compositions can be administered as pharmaceutically acceptable compositions to a patient in any therapeutically acceptable dosage, including those administered to a patient intravenously, subcutaneously, percutaneously, intratracheally, intramuscularly, intramucosally, intracutaneously, intra-articularly, orally or parenterally.

Compositions containing the embolic particles can be prepared in calibrated concentrations of the embolic particles for ease of delivery by the physician. The density of the composition can be from about 1.1 to 1.4 g/cm³, or from about 1.2 to about 1.3 g/cm³ in saline solution. Suspensions of the embolic particles in saline solution can be prepared to form stable suspensions over duration of time. The suspensions of embolic particles can be stable from 1 to 10 minutes, 2-7 minutes or 3 to 6 minutes. The physician can determine concentration of embolic particles by adjusting the weight ratio of the embolic particles to physiological solution. If weight ratio of the embolic particles is too small, too much liquid could be injected in a blood vessel, possibly allowing the embolic particles to stray into lateral vessels. In embodiments, the weight ratio of the embolic particles to the physiological solution is about 0.01 to 15% by weight.

In other embodiments, the embolic particles can be used for lung volume reduction, such as to treat any of the Chronic Obstructive Pulmonary Diseases (COPD). For example, a portion of the lung may be collapsed by obstructing an air passageway communicating with the portion of the lung to be collapsed. The air passageway may be obstructed by placing the embolic particles in the air passageway. The particles prevent air from being inhaled into or exhaled from the lung portion. Once the air passageway is sealed, the residual air within the lung can be

absorbed over time to cause the lung portion to collapse. In other embodiments, the lung portion can be collapsed by inserting a conduit into the air passageway communicating with the lung portion, pulling a vacuum in the lung portion through the conduit to collapse the lung portion, and maintaining the lung portion in a collapsed state by sealing the air passageway with the embolic particles. To efficiently pull the vacuum in the lung portion to be collapsed, the space between the outer surface of the conduit and the inner surface of the air passageway may be sealed as the vacuum is pulled. The air passageway can be sealed while the lung portion is collapsed.

In some embodiments, the embolic particles described above can be used for tissue bulking. For example, the particles can be used to treat intrinsic sphincteric deficiency (ISD), vesicoureteral reflux, gastroesophageal reflux disease (GERD), and vocal cord paralysis, e.g., to restore glottic competence in cases of paralytic dysphonia. The particles can be used as a graft material or a filler to fill and/or to smooth out soft tissue defects, such as for reconstructive or cosmetic applications, e.g., surgery. Examples of applications include reconstruction of cleft lips; scars, e.g., depressed scars from chicken pox or acne scars; indentations resulting from liposuction; wrinkles, e.g., glabella frown wrinkles; and soft tissue augmentation of thin lips. Other applications are described in U.S.S.N. 10/231,664, filed August 30, 2002, hereby incorporated by reference.

All publications, applications, references, and patents referred to in this application are herein incorporated by reference in their entirety.

Other embodiments are within the claims.